

QUALITY OF LIFE IN REFLEX SYNCOPE PATIENTS: BENEFITS OF A SYSTEMATIC EDUCATIONAL PREVENTION PROGRAM

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Introduction

Syncope is a common clinical condition with a major impact on patients' quality of life (QOL)¹. QOL measurement scales are crucial in the management of this situation and play an important role in its treatment². Education, lifestyle measures, adequate hydration, salt intake and counter-pressure maneuvers are well established for the treatment of reflex syncope (RS)¹⁻⁴.

Aim

Assess a 3-month evolution (follow-up [FUP]) of a prevention educational measures program in patients with recurrent RS through the application of a specific questionnaire of **Impact of Syncope in Quality of Life (ISQL)**^{2,3} in a syncope unit (SU).

Methods

ISQL was applied to all patients referred to head-up tilt testing (HUT) from May to October 2020.

After HUT ⊕ patients received an **educational program to avoid syncope recurrence**.

3-months after, a new ISQL application was done and educational measures sessions reinforced.

Results and Discussion

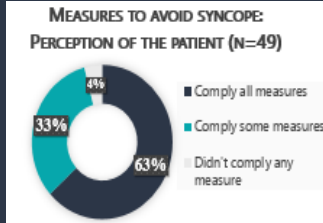
Characteristics of the study sample

| | |
|---------------------------------|-------------|
| AGE, years, mean ± SD | 56.1 ± 17.7 |
| Females, n (%) | 24 (51%) |
| PROVOCATIVE FACTORS, (%) | |
| Emotional stress | 30.5% |
| Prolonged orthostatism | 4.3% |
| Position change | 13% |
| Warm environment | 13% |
| Other triggers | 39.2% |

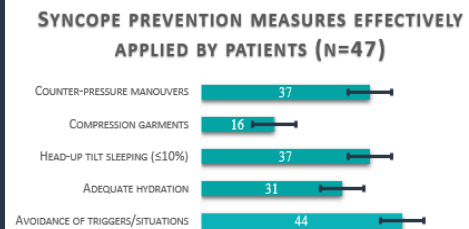
49 patients (51% ♀, median age of 56 years), with a mean of 6,2 events per year.

Syncope recurrence in 3-month FUP was noticed in 16% (n=8), with a mean of a single episode.

Avaliation of the educational program



The majority of patients (63%) **thought they had complied** with all the measures to prevent syncope. When asked if all measures to avoid syncope were done 96% (n=47) had a **positive answer**.

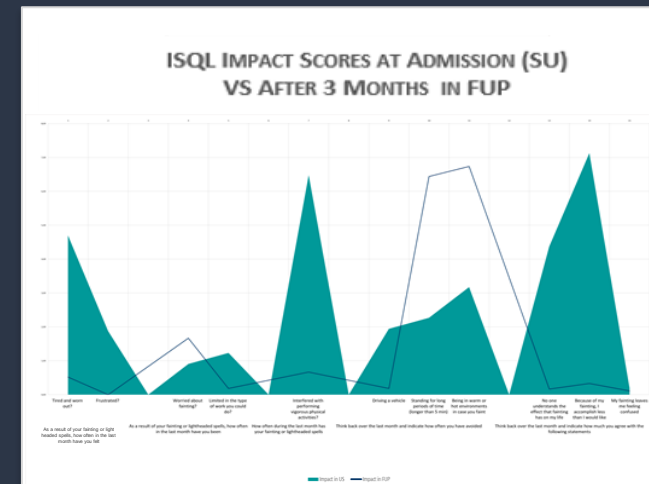


Only 2 patients (4%) have failed with all measures to avoid syncope recurrence.

ISQL dimensions

The ISQL is a valid measure of the impact of syncope on QOL. The 5 dimensions measures are disability, fear, depression and physical limitations, correlating with the frequency of syncope events.^{2,3}

11 items involving a variety of different situations, as tiredness, worry about fainting, interference with daily activities, avoiding driving a car or avoiding situations that may trigger a syncopal episode.^{3,4}



[The 'impact' of the item is the product of "frequency" and "severity", according by the proportion/score of patients' affirmative answers]

The **mean ISQL index** before HUT was 44,2±11,9 and 3-months after is 50,53±8,9 (p<0,05). The **impact of ISQL** in a **3-months FUP** suggests an **improvement** on QOL (95%CI).

Conclusions

With this initial experience, we demonstrated that a systematic educational program for patients with recurrent RS may have potential benefits as a complement in the treatment of this patients, with significant improvement in ISQL index.

The validation of this program is an ongoing process. Further studies at 6-month and 1-year are needed to evaluate the improvement of QOL in this patients, witch we intend to apply in the future.

References

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